Fill in this information to identify your case: Case 10-20701 United States Bankruptcy Court for the:	Entered 09/24/18 14:30 Document Page 1 of 58	0:46 Desc Main
Northern District of Illinois		
Case number (If known):	hapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1: Identify Yourself		
Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Write the name that is on your government-issued picture identification (for example, your	Cesar First name	Amanda First name
driver's license or passport). Bring your picture identification to your meeting with the trustee.	Middle name Canizares Last name	Middle name Lederer Last name
	Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
All other names you have used in the last 8 years		
Include your married or maiden	First name	First name
riames.	Middle name	Middle name
	Last name	Last name
1.4		
••	First name	First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 2 6 0 8 OR 9xx - xx	XXX - XX - <u>9 6 2 6</u> OR 9xx - XX
	Vour full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal individual Taxpayer Identification number	Vour full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr, II, III) All other names you have used in the last 8 years Include your married or maiden names. Middle name Last name First name Middle name Last name Only the last 4 digits of your Social Security number or federal individual Taxpayer Identification number Or No. 200 - 200 - 8 OR

Debtor 1 Debtor 2	Cesar Amarida First Name	81 Doc 1 File Middle Name	Inizar 24/18 Settment ast Name	Entered 0 Page 2 of !	9/24/18 14:30:46 58 Case number (if kr	Desc Main
		About Debtor 1:			About Debtor 2 (Spouse (Only in a Joint Case):
Employer I	ess names and dentification EIN) you have used syears	☑I have not used any bu	usiness names or	EINs.	☑ I have not used any busi	ness names or EINs.
Include trade business as	e names and <i>doing</i> names	Business name		· · · · · · · · · · · · · · · · · · ·	Business name	
		Business name			Business name	
		EIN	<u> </u>	_	EIN	
		EIN			EIN	
Where you	live	a temperatura di Antonio di Antoni			If Debtor 2 lives at a different	ent address:
		2929 N Moody Ave Number Street	•	· · · · · · · · · · · · · · · · · · ·	Number Street	
		Chicago, IL 60634-5027 City	State	ZIP Code	City	
		Cook County			·	State ZIP Code
		If your mailing address is it in here. Note that the co this mailing address.	s different from ti urt will send any n	he one above, fill otices to you at	If Debtor 2's mailing addre above, fill it in here. Note th to you at this mailing address	at the court will send any notice
		Number Street			Number Street	
		P.O. Box			P.O. Box	
		City	State	ZIP Code	City	State ZIP Code
Why you are	e choosing <i>this</i> e for bankruptcy	Check one:			Check one:	ed at the control of
		Over the last 180 days lived in this district lon	s before filing this p ger than in any ot	petition, I have her district.	Over the last 180 days b lived in this district longer	efore filing this petition, I have r than in any other district.
		I have another reason. (See 28 U.S.C. § 1408	Explain. 3)		I have another reason. Ex (See 28 U.S.C. § 1408)	xplain.

I have another reason. Explain. (See 28 U.S.C. § 1408)	

 (See 28 U.S.	u n 1.			

Debtor	1
Debtor	2

Case 18-26	781 Doc 1	-Lederer	Entered 09/24/2	and the second s		
First Name	Middle Name	Last Name	-Page 3 o f 58	Case number (if i	(nown)	***

Pai	rt 2: Tell the Court About Yo	ır Bankruptcy Case
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay
		Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	✓ No. ☐ Yes. District Case number Case number
		District When Case number MM / DD / YYYY District When Case number MM / DD / YYYY
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓No. ☐Yes. Debtor Relationship to you District When Case number, if known MM / DD / YYYY Debtor Relationship to you District When Case number if known
		District When Case number, if known MM / DD / YYYY
11.	Do you rent your residence?	 ✓ No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction judgment against you? ✓ No. Go to line 12. ✓ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part
	- IN THE RESERVE OF THE PROPERTY OF THE PROPER	of this bankruptcy petition.

	otor 1 Cesar otor 2 Amanda 18-267	Doc 1 File (1997) 24/18 Entered 09/24/18 14:30:46 Desc Ma	ain
	First Name	idle Name Datinent Page 4 of 58 Case number (if known)	
Рa	rt 3: Report About Any Busi	ses You Own as a Sole Proprietor	
12	. Are you a sole proprietor of any	No. Go to Part 4.	
	full- or part-time business?	Yes. Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	Number Street	
		City State ZIP Code	
		Check the appropriate box to describe your business:	
		Health Care Business (as defined in 11 U.S.C. § 101(27A))	
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
	. •	Stockbroker (as defined in 11 U.S.C. § 101(53A))	
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))	
		☐ None of the above	•
MA NINE			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it cal idlines. If you indicate that you are a small business debtor, you must attach your most recent balance shee rations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow J.S.C. § 1116(1)(B).	at ctatament of
	For a definition of small business	No. I am not filing under Chapter 11.	
	debtor, see 11 U.S.C. § 101(51D).	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition Bankruptcy Code.	in the
		Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Code.	Bankruptcy
ar	t 4: Report if You Own or Ha	Any Hazardous Property or Any Property That Needs immediate Attention	numa,
		No.	
14.	Do you own or have any property that poses or is	Yes. What is the hazard?	
	alleged to pose a threat of imminent and identifiable		
	hazard to public health or		
	safety? Or do you own any property that needs immediate	If immediate attention is needed why is it needed?	

attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that

needs urgent repairs?

If immediate attention is needed, why is it needed? ___

Number

City

Street

Where is the property?

ZIP Code

State

Debtor	1
Debtor	2

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First Name

Middle Name

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Case number (if known) _

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational

decisions about finances

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the

internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational

decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor	1
Debtor	2

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12	First Name	Middle Name	Document Last Name	Entered 09/24/2 - Page 6 o f 58	Case number (if k	nown)

Part 6: Answer These Questions for Reporting Purposes								
16. What kind of debts do you have?	16a.	Are your debts primarily can individual primarily for a	onsumer debts? Co	onsumer debts are define household purpose,"	ed in 11 U.S.C. § 101(8) as "incurred by			
llaver	,	No. Go to line 16b.	• •					
		Yes. Go to line 17.	17.					
	16b.	Are your debts primarily b business or investment or the	usiness debts? Bus	siness debts are debts the	at you incurred to obtain money for a trment.			
·		No. Go to line 16c.						
		Yes. Go to line 17.						
	16c.	State the type of debts you o	State the type of debts you owe that are not consumer debts or business debts.					
17. Are you filing under Chapter 7?		No. I am not filing under 0	Chapter 7. Go to line	18.				
Do you estimate that after any exempt property is excluded and administrative expenses	Ø	expenses are paid th	oter 7. Do you estima at funds will be avail	ate that after any exempt able to distribute to unse	property is excluded and administrative cured creditors?			
are paid that funds will be available for distribution to		☑ No						
unsecured creditors?	sawaan nga	□ Yes		Districtive without the second state of the se				
40 How many and there do	2	1-49 🔲 50-99		5,001-10,000	25,001-50,000 50,000-100,000			
How many creditors do you estimate that you owe?	L	100-199 🔲 200-999	10,001-25,0	000	☐ More than 100,000			
		\$0-\$50,000	\$1,000,00	1-\$10 million	☐ \$500,000,001-\$1 billion			
19. How much do you estimate your assets to be worth?		\$50,001-\$100,000	\$10,000,0	01-\$50 million	1,000,000,001-\$10 billion			
	☑	\$100,001-\$500,000	\$50,000,0	01-\$100 million	\$10,000,000,001-\$50 billion			
	L	\$500,001-\$1 million	\$100,000,0	001-\$500 million	More than \$50 billion			
		\$0-\$50,000	\$1,000,00	1-\$10 million	\$500,000,001-\$1 billion			
20. How much do you estimate your liabilities to be?		\$50,001-\$100,000	\$10,000,00	01-\$50 million	\$1,000,000,001-\$10 billion			
,	Z.	\$100,001-\$500,000	\$50,000,00	01-\$100 million	\$10,000,000,001-\$50 billion			
		\$500,001-\$1 million	\$100,000,0	001-\$500 million	More than \$50 billion			
Part 7: Sign Below								
For you I have ex	amino	d this potition, and I dealers						
If I have	choser	d this petition, and I declare u to file under Chanter 7. Lam	aware that I may no	ry that the information pr	ovided is true and correct.			
Code. Lu	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
If no attor	ney re	presents me and I did not pay ad the notice required by 11 (or agree to pay som	neone who is not an attor	ney to help me fill out this document, I have			
		n accordance with the chapte		States Code, specified in	n this petition.			
l underst	and ma	king a false statement, conc	ealing property, or ob-	Maining money or proper	ty by fraud in connection with a bankruptcy case § 152, 1341, 1519, and 3571.			
X				Y	o to a train to to a una out it.			
Ce	esar Ca	anizares, Debtor 1		Amanda Lede	erer. Debtor 2			
·		on <u>09/24/2018</u>		Executed on _				
	and the same of the same of	MM/ DD/ YYYY			MM/ DD/ YYYY			

	tor 1 Yor 2	Cas e 18-267	'81 C	oc 1	Fileancon		Entered 09		1:30:46	Desc Main	
3***	500000000000000000000000000000000000000	First Name	Middle:	Varne	Last Nor		Page 7 of 5	8 Case	number (if ka	owń)	
Pa	t 6: Answe	Titese Questio	nes (or R	eportin	g Purposes	8;	The second state of the second	en a man a managaran a man Managaran a managaran a ma		ų	Sign de Carlos de la companya de la
16	What kind o have?	(debts do you		linge	sibis primarily o Il primarily lor a I to line 16b o to line 17	onsumer personal,	Sables? Consumer de family, or household p	bis are defined ourpose;	m 11 U.S.C. §	\$ 101(8) as focum	ed by
	8	3) Ti		1 ves. G	to line 160 0 to line 17.		bits? Business dehi: operation of the busi operation of the business	ness of investr		a obtain money for	æ }
17.	Do you estim exempt prope and administ are paid that	distribution to	94.280 P 1	o. Tamn S. Lamfi expen	ot filing under Chap ling under Chap ses are paid the 'No 'Yes'	hapte/7.(ter7.Dov	So to line 18. ou estimate that after t be available to distri	any exempt pr libide to unsecx	operly is exclured creditors?	ided and administr	ative
18.	How many on estimate that	editors do you (ou owe?	O 10	40 □ 50 0:199 □	200.999	2000000	000-5,000 ☐ 5,001 0001-25,000	-10,000	7893.67	0,000 □ 50,000 in 100,000	100,000
19.	How much do your assets to	you estimate So worth?		-\$50,000 0,001-\$10 00,001-\$5 00,001-\$1	0,000		51,000,001-\$10 millio 10,000,001-\$50 millio 50,000,001-\$100 mill 100,000,001-\$500 m	Ori Bon	Ū sijoo Ū siojo	000,001.\$1 billion 0,000,001.\$10 billio 00,000,001.\$50 bill Uhan \$50 billion	
n.nes y	Howmush do your liabilities	to be?	[] \$50 [] \$10	\$50,000),001-\$100)0,001-\$50)0,001-\$5	000,000	1 s 2 £	1,000,001-\$10 millior 10,000,001-\$50 millio 50,000,001-\$100 mill 100,000,001-\$500 mi	on Ion	回 \$1,000 回 \$10,00	200,001-\$1 billion 2,000,001-\$10 billio 10,000,001-\$50 bill than \$50 billion	in
For	Sign Stat		and the second		\$00 A				Maria Maria Maria (Maria Maria M	A STATE OF THE STA	
		Gode Tu If no affor obtained	rdersland ney repres and read if	ne unkier o the relief a ents me ar ne notice n	maprer 7 i am ; ivaliable under e nd.1 did not pay ; equired by 11 U	tware that sach chapt or agree to S.C. § 34	y of perjury that the in I may proceed, if eligi et, and I choose to pr pay someone who is 2(b).	ible, under Cha oceed under C inot an altorne	pter7;11(12) hapter 7: y to help me fil	or 18 of little 11, Un	

Junderstand making a false statement, concealing property or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both 18 (yS.C. §§ 152, 1341, 1519, and 3571)

Cesar Canizares, Debtor 1

Executed on 09/18/2018 MM/ DD/ YYYY

uda Ledefer, Deblor 2

Executed on 09/18/20/18 MM/ DD/ YYYY

Debtor 1	Cas e 18-26781	Doc 1	Fil @eh@9# 24/18	Entered 09/24	/18 14:30:46	Des
Debtor 2	Amanda First Name Mid	Idle Name	- Dest Name	Page 8 of 58	Case number (if ki	nown) _

Bar number

For your attorney if you are represented by one	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and					
If you are not represented by an attorney, you do not need to file this page.	which the person is eligible. I also certify that I have do in a case in which § 707(b)(4)(D) applies, certify that I filed with the petition is incorrect.	elivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, have no knowledge after an inquiry that the information in the scheduk				
[
	X	B				
	Joseph Michelotti , Attorney	Date <u>09/24/2018</u> MM / DD / YYYY				
	3030pr Microsoft , Attorney	י אוואו / שם אוואוויו				
·						
	·					
•	Joseph Michelotti					
	Printed name					
	ARC I I set man a second					
	Michelotti & Associates, Ltd.					
	Firm name					
	2625 Butterfield Rd Ste 138s	•				
	Number Street					
•						
	Oak Brook	IL 60523-1244				
	City	State ZIP Code				
	Contact phone (630) 928-0100	Email address joe@michelottilaw.com				
	201 mor busing (200) 050-0 100	Lindi dddiess <u>foesincielottiaw.com</u>				

State

	to identify your case and this filing	,	24/18 14:30:46 Desc Main
Debtor 1	Cesar	Document Page 9 of 58 Canizares	
Destor 1	First Name Middle N		
Debtor 2	Amanda	Lodowa	
(Spouse, if filing)	First Name Middle M	Lederer Name Last Name	
I Inited Ctates Davids			
United States Bankrı	uptcy Court for the:	Northern District of Illinois	☐ Check if this is an
Case number			amended filing
Official Form	106A/B		
Schedule /	A/B: Property	· .	12:
n each category, sepa	rately list and describe items. Lis	st an asset only once. If an asset fits in more than on	e category, list the asset in the category where you thin lly responsible for supplying correct information. If mo
	· · · · · · · · · · · · · · · · · · ·	y, Land, or Other Real Estate You Own or I	
☐ No. Go to Par ☑ Yes. Where is	·		
1.1 2929 N Mo			
	ody Ave	What is the property? Check all that apply.	
Street addre	ody Ave ss, if available, or other	What is the property? Check all that apply. Single-family home	Donot signet secured claims as exemptions, Put the product of any secured claims are specified (A)
		☑ Single-family home ☐ Duplex or multi-unit building	De not decirct secured claims as exemptions, Put the emission of any secured deans an effective Decirco. Credition What Have Claims Secured by Property
Street addre		☑ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	amount of thy securet dams an Stricture D. Gedings Who Have Claims Secured by Property.
Street addre description	ss, if available, or other	✓ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property? Couring Secured by Property. Current value of the entire property?
Street addre description		✓ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	Current value of the Current value of the
Street addre description Chicago, II	ss, if available, or other	✓ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property? Seson of the portion you own?
Street addre description Chicago, II City	ss, if available, or other	☑ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	Current value of the entire property? Describe the nature of your ownership interest (su as fee simple, tenancy by the entireties, or a life
Street addre description Chicago, II	ss, if available, or other	✓ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare	Current value of the entire property? Current value of the portion you own? \$290,000.00 Current value of the portion you own? \$290,000.00 Describe the nature of your ownership interest (su as fee simple, tenancy by the entireties, or a life estate), if known.
Street addre description Chicago, II City	ss, if available, or other	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? Describe the nature of your ownership interest (su as fee simple, tenancy by the entireties, or a life
Street addre description Chicago, II City	ss, if available, or other	Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only	Current value of the entire property? Describe the nature of your ownership interest (su as fee simple, tenancy by the entireties, or a life estate), if known.
Street addre description Chicago, II City	ss, if available, or other	Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only	Current value of the entire property? Describe the nature of your ownership interest (su as fee simple, tenancy by the entireties, or a life estate), if known. Current value of the portion you own? \$290,000.00 \$290,000.00 \$290,000.00 \$290,000.00 Current value of the portion you own? \$290,000.00 \$290,000.00 Check if this is community property
Street addre description Chicago, II City	ss, if available, or other	Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only	Current value of the entire property? Describe the nature of your ownership interest (su as fee simple, tenancy by the entireties, or a life estate), if known.
Street addre description Chicago, II City	ss, if available, or other	Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only	Current value of the entire property? Describe the nature of your ownership interest (su as fee simple, tenancy by the entireties, or a life estate), if known. Current value of the portion you own? \$290,000.00 \$290,000.00 \$290,000.00 \$290,000.00 Current value of the portion you own? \$290,000.00 \$290,000.00 Check if this is community property

	Amanda First Name	Middle Na	Distributed Page 10 of 58 Last Name	Case number (if known)	·
rt 2:	Describe Your Vel	nicles			
own th	n, lease, or have legal at someone else drives. vans, trucks, tractors, s	. If you lease a vehi	est in any vehicles, whether they are registered or not? icle, also report it on Schedule G: Executory Contracts and es, motorcycles	Include any vehicles I Unexpired Leases.	<i>:</i>
☐ No			· · · · · · · · · · · · · · · · · · ·		
☑ Yes	•				
3.1 M	ake:	Audi	Who has an interest in the property? Check one. Debtor 1 only		ilms or exemptions. Put the
M	odel:	<u>Q5</u>	Debtor 2 only	amount of any secured dis Orealists White have Cha	
Ye	ear:	2018	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
Αŗ	proximate mileage:	10,000	At least one of the debtors and another	entire property? \$36,000.00	portion you own?
Ot	ther information:		lue Check if this is community property (see	<u> </u>	\$0.00
			instructions)		
		,			
VOLLOW	vn or have more than or	ne list here			
3.2 Ma		Chevrolet	Who has an interest in the property? Check one.		
		Equinox	Debtor 1 only	Do not deglico secured da empurit of any secured da	ims or exemptions. Put the ims on Schoolale D
RVIO	odel:		Debtor 2 only	Cledios Who Leve Cler	
Ye	ar:	2018	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the	Current value of the
Αp	proximate mileage:	10,000	. <u> </u>	entire property? \$25,500.00	portion you own? \$25,500.00
<u>Ot</u>	her information:		Check if this is community property (see instructions)		
			" Not doubles,		
					•
				•	
.3 Ma	ake:	Valvo	Who has an interest in the property? Check one.	Demoidedur secured da	ins of Exemplois Partie
Mo	odel:	VNL64T	Debtor 1 only Debtor 2 only	almuditofanyseculed da Critisias Who Have Class	
Ye	ar:	2017	Debtor 1 and Debtor 2 only	Current value of the	
	proximate mileage:	175,000	At least one of the debtors and another	entire property?	Current value of the portion you own?
-	her information:	1.	☐ Check if this is community property (see	\$10,600.00	\$10,600.00
	emi-Trailer		instructions)		
3		······	.		
L					

Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

\$36,100.00

Debtor 1 Debtor 2	Cesse 18			Fil @hi@9 #24/18 D&@m ent	B Entered 09/24/1 Page 11 of 58	L8 14:30:46 Case number <i>(if kn</i> i	Desc Ma	in
	First Name	Mild	ile Name	Last Name				the destruction construction and the second construction a
	•		÷		e ^t			
Part 3: Des	cribe Your Pe	rsonal and	Househol	d Items			·	
To year own a	charter and levels	e es estrable i	GLARES PROBERTINES	/cs the following tieps:			Charges	value of the
			0.00				portion	rouroum?
							Control of the Contro	aduat secured exemptions
Haysahala	l accede and from	iohingo			E-rin (PEC) (PEC) (PEC) (PEC)	minimum in the second second		edenie schie
	I goods and furn Major appliance	_	nens china k	itchenware				
□ No	wajor appriaries							
= 2	scribe	Household	goods and fu	mishings				\$650.00
. Electronics	;							•
Examples:	Televisions and	radios; audio	video, stered	, and digital equipment;	computers, printers, scanners	; music collections;	·	
□ N-	electronic device	s including c	eli phones, ca	imeras, media players, g	ames			
∐ No ✓ Yes. De	scribe	Television, (Computer					\$300.00
		L						
B. Collectible:	s of value						•	
	Antiques and fig	urines; painti	ngs, prints, or	other artwork; books, pie	ctures, or other art objects;		·	
-1	stamp, coin, or b	oaseball card	collections; o	ther collections, memora	bilia, collectibles			
☑ No ☐ Yes. De	scribe							
		<u> </u>						
). Equipment	for sports and h	obbies						
Examples:	Sports, photogra	phic, exercise	e, and other h	obby equipment; bicycles	, pool tables, golf clubs, skis; o	anoes and kayaks;		
. r-#	carpentry tools;	musical instru	ments			-	•	
▼ No. ☐ Yes. De	scribe			·			—	···
		<u> </u>						
10. Firearms								
Examples:	Pistols, rifles, s	hotguns, amr	nunition, and	related equipment				
☑ No				• •				
🔲 Yes. D	escribe				· · · · ·			
. • •							······	
1. Clothes					*			every or
Examples:	Everyday clothe	es, furs, leath	er coats, desi	gner wear, shoes, access	sories			
U No Voc n	occribo	Clothes			***************************************			¢250.00

12. Jewelry

☐ No ✓ Yes. Describe......

Wedding Ring

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

\$3,000.00

Debt	or 2	Amanda		Dissern ment	Page 12 of 58	Case number (if known) _	
-267069474-4904	nertriksketelikkinsebecumerhennunere	First Name	Middle Name	Last Name		Oddo Hamber (# knowny =	~~~
13.	Non-farm a	animale					
13,		Dogs, cats, bir	de horene	•	•		
	-	Doys, cats, bii	us, noises				
	☑ No	escribe					unknown
	Tes. De	escribe					
14.	Any other	personal and ho	usehold items you did not	already list, including	any health aids you did not	list	
	√ No		<u> </u>				
		escribe					
				· · · · · · · · · · · · · · · · · · ·			
45		. H					
15.					for pages you have attache		\$4.200.00
	ior Part 3.	write that numi	er nere			······································	\$4,200.00
					•		
Par	t 4: Desc	ribe Your Fin	ancial Assets				
				a de la companion de la compan	gerupunan er apresentationale in de	Seriju ji kaside republikan kelangan j	
DO	ACM CHARGE	have any legar	or ecuitable interest in any	of the following?	CLASS CONTRACTOR CONTR		Gurrent value of the house portions you cown?
		Zantla.		A Charles		en procupation is	Do not deduct secured
							claims or exemptions.
	_					Tarihi i jaga basa a	
16.	Cash						
	Examples:	Money you hav	e in your wallet, in your home	e, in a safe deposit box, a	and on hand when you file you	ur petition	
	☑ No						
	₩ Yes				Cash.	***************************************	
47	Damasita -	- 6					
17.	Deposits of	=					
	Examples:	similar institutio	rigs, or other financial accou ons. If you have multiple acc	ints; certificates of depo ounts with the same ins	sit; shares in credit unions, b	prokerage houses, and other	
	☐ No	on the model	no in journate manapie dec		diadon, not coon		term and a second
	7 Yes		·				
				Institution name:			
					•		e esta a companya di compa
		17	7.1. Checking account:	Bank of Americ	•a		\$1,500.00
			The one of the original origi	- COIN OF MINOR			\$1,500.00
		17	7.2. Checking account:	Bank of Americ	-		44 400 00
		1.2	.z. Onecking account,	Dank Of Atheric	.a		\$1,400.00
		4.	1.2. Cardana accept				
-		17	7.3. Savings account:				
				•			
		17	7.4. Savings account:	·			· ·
		17	7.5. Certificates of deposit:				
				÷			
		17	7.6. Other financial account:				
		4-	7.7. Other financial access				
			7.7. Other financial account:				
							· · · · · · · · · · · · · · · · · · ·

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Amanda Page 12 of 58 Case number (if king)

Debtor 1

Debtor 2

Debt Debt		Ceas e 18-2 Amanda	26781 Doc 1	Fil @ti@9 #24/18	Entered 09/24 Page 13 of 58	4/18 14:30:46 Case number (if kno	Desc Main
g	***************************************	First Name	Middle Name	Last Name	1 ago 10 01 00	Case Harribo, (ii kiii	***************************************
		17.0	Other financial account:	•			
		17.0.	Outer infantalia account				
		17.9.	Other financial account:				<u> </u>
18.		tual funds, or publ	-		•		
	_ `	Bond funds, invest	ment accounts with broke	erage firms, money marke	t accounts		
	No Yes						
19.		ly traded stock and rtnership, and joir		ted and unincorporated	businesses, including a	an interest in	
	∑ Í No	, ,					•
manage and a second	=	e specific					
AND		ion about					
N. Marina	them						
20.	Governmen	nt and corporate b	onds and other negotia	able and non-negotiable	e instruments		* 4
	Negotiable i	instruments include	personal checks, cashier those you cannot transfe	s' checks, promissory not	es, and money orders.		
	∑ Í No		•			•	
understellere v vendersk v verleibisk v.v.	Yes. Giv	e specific ion about					
21.		or pension accou	inte			a ·	
41.		-		13(h) thrift savings accou	ınts, or other pension or p	rofit charing plans	
	☑ No		.N.S.A. Neogri, 40 (K), 40	osto), u init savings accou	ins, or other pension or p	oroni-sharing plans	
(4440000000000000000000000000000000000	Yes. List separate	t each account ely.					
22.	Security de	posits and prepayr	ments				
Arthur and a second	Your share o	of all unused deposit	ts you have made so that	you may continue service	or use from a company		
	Examples: A others	Agreements with lan	ndlords, prepaid rent, pub	olic utilities (electric, gas,	water), telecommunicatio	ns companies, or	
NAVAMENTA MANTENAM	☑ No ☐ Yes						
23.	Annuities (/	A contract for a perio	odic payment of money to	you, either for life or for	a number of years)		
	√ No ☐ Yes						
24.	Interests in	an education IRA	in an account in a qual	lified ARI E program or	under a qualified state t	rition program	
	26 U.S.C. §	§ 530(b)(1), 529A(b		ined ADEL program, or	under a quanneu state (widon program.	
	✓ No ☐ Yes	***************************************					
			ution name and description	on. Separately file the rec	ords of any interests. 11 U	J.S.C. § 521(c):	
25.	Trusts, equi benefit	itable or future inte	erests in property (other	than anything listed in	line 1), and rights or pov	wers exercisable for you	er
	☑ No						
	Yes. Giv	e specific ion about them					

Deb Deb		Case 18-26 Amanda First Name	781 Do	Dreferent	18 Entered 09/24 — Page 14 of 58	1/18 14:30:46 De Case number (if known)	esc Main
**************************************	**************************************	the latest the second	Middle Naii	Last Walle			
26.				s, and other intellectual pro			
		Internet domain nam	ies, websites, p	proceeds from royalties and	licensing agreements		
	☑ No ☐ Yes. Giv	vie specific		*			1 .
		tion about them					
27.	Licenses, fi	ranchises, and other	general intano	gibles			
	Examples:	Building permits, exc professional licenses	clusive license	s, cooperative association h	oldings, liquor licenses,		
	∑ Í No	· professional licenses					
	Yes. Giv	ve specific					
	iniomat	tion about them					,
Mon	ey or propert	y owed to you?	aran da aran Barangan	o ling see a gallerin medicili dili. Nederli desembli menden di produncio		And the control of th	Current value of the
				undig algebra en belgger (blade Standard and de standard	incomposition and resident control of the control of the		portion you own? Do not deduct secured
		en a ryfer regelethiûn. De gelekk et bewer		的复数电影电影			datris er exemptions
28.	Tax refunds	s owed to you				eranalis (* 15. july)	
	☑ No					and the state of t	
	Yes. Gir	ve specific information	about		· · · · · · · · · · · · · · · · · · ·	Federal:	
	ain	em, including whether ready filed the returns a	and the			State:	PR
	tax	k years				l.ocal:	
			L				
29.	Family sup						
	Examples:	Past due or lump sun	n alimony, spou	ısal support, child support, m	aintenance, divorce settlemen	t, property settlement	
	☑ No						
	☐ Yes. GN	ve specific information				Alimony:	***
						Maintenance:	
						Support:	
						Divorce settlement:	: ''
						Property settlement:	
					:		
		nts someone owes ye Linnaid wages, disabi		ogramonto dischilitatamasta	atala a a		
	_	Security benefits; unpa	aid Ioans you n	nade to someone else	sick pay, vacation pay, workers	compensation, Social	
	No Civ	e specific information.	. 1				
	HES, GIV	re specilic information.					
							
31.	Interests in i	insurance policies					
		-	e insurance; h	ealth savings account (HSA)	; credit, homeowner's, or rente	er's insurance	
	☑ No			_ , , ,			
		me the insurance comp each policy and list its v		 - :	Surrender or ref	fund	
· · · · · · · · · · · · · · · · · · ·	MANGANINA AND AND AND AND AND AND AND AND AND A		(Company name: Beneficiary:	va	alue:	

Debtor 1

Case 18-26781 Amanda

Deb	tor 2	Amanda		Diggin hent	Page 15 of 58	Cono mumbos (te to	
		First Name	Middle Na	me Last Name		Case number (ir known))
Weenster-Need	TO ACCOUNT OF THE PROPERTY OF COMMUNICATION	Mercelininerscommunications and messaria	http://www.commonane.com/	the three transfers of the second of the sec			
32.	Any interest	in property th	at is due you from :	someone who has died		•	
	n you are the	e beneficiary or	a living trust, expect	proceeds from a life insurance	policy, or are currently entitle	ed to receive property	
		neone has died	•				
	☑ No						
		e specific infor	mation T				7
	ies. Giv	e specific irrior	mador		•		
			<u> </u>				
							ž.
33.	Claims agai	nst third partie	s, whether or not y	ou have filed a lawsuit or mad	de a demand for payment		
	Examples:	Accidents, em	ployment disputes i	nsurance claims, or rights to so	10		-
			programma disputes, i	ribulation ciditis, or rights to si	ue		
	☑ No		 				•
	Yes. De:	scribe each cla	im				
34.	Other contir	ngent and unli	quidated claims of	every nature, including cour	nterclaims of the debtor and	d rights	
	to set off cla	ims		3		3	
	√ No		·				
	Yes De	scribe each cla	im				
		Johns Chair Ga					
							• •
35.	Any financia	l assets vou di	d not already list				•
		• •	,	•			
	₩ No				· · ·		
	Yes Give	e specific infor	mation				İ
	_ 105. 010	c opcome man				-	
			L				1
20	6 alal 4)1-11				·		
JO.	Add the dollar	ar value of all o	or your entries from	Part 4, including any entries	for pages you have attache	ed	
	for Part 4. W	rite that numb	oer here			→	\$2,900.00
					•		
Par	5 Descri	ihe Anv Rus	inoce.Polatod I	Property You Own or Ha			
			mess-related i	Toperty Tota Owil Of Ha	ve an interest in. Lisi	any real estate in Pa	art 1.
37 .	Do you own	or have any le	nal or equitable inte	erest in any business-related	removin-2		
	EN COL		gar or oquicable into	rest in any business related p	property:		
	No. Go to	Part 6.		•		•	
	Yes. Go to	line 38.			•		
				* *			
							Current value of the
							portion you give?
							Do not deduct secured
							Claims or exemptions
38.	Accounts rec	eivable or con	nmissions you alrea	icki earnod			
- •			annosionis you and	му сапки		* *	***************************************
	√ No						***************************************
	Yes. Desc	riba					***************************************
	ies. Desc	inde					SAAAA AA SAA
							<u> </u>
		_					
39.	Office equipr	nent, furnishir	ngs, and supplies				**************************************
			_	ero modomo neletara acida	for any state of the state of t		T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-
	-manyoras t	-430 1633-161df	a computers, soltWa	are, modems, printers, copiers,	iax macnines, rugs, telephor	nes, desks, chairs, electronic	devices
	☑ No						4-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A
							AN CHARLES
	Yes. Desc	ribe				ļ	жение.
				-			
					:		1

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Amanda Distribution Page 15 of 58 coopyrights (64.44)

Debtor 1

Debtor 2

Debi	tor 2	Amanda		D ispleme nt	Page 16 of 58	Case number (if known)	
~~~~	· ·	First Name	Middle Name	Last Name		Case number (ii known)	
		•			*	•	
40.	Machinery,	fixtures, equipmen	it, supplies you use in l	ousiness, and tools of	your trade		
	<b>☑</b> No	<del></del>					
	Yes. De	scribe					
		l					
41.	Inventory						
71.	-						
	☑ No ☐ Yes. De	cariba					
	LI TES. DE	sorice					
42.	Interests in	partnerships or jo	oint ventures				
	<b>☑</b> No						
	Yes. De	scribe					
43.	Customer	ists mailing lists (	or other compilations				
	☑ No	ioosi maiinig noosi	or outer complications				
		your lists include	personally identifiable i	information (as defined	l in 11 U.S.C. § 101(41A))?		
		<b>Ž</b> No		•			
	Ε	Yes. Describe					<u> </u>
44.	Any busine	ss-related property	you did not already list	t			
	<b>☑</b> No	*					
	Yes. Giv			•	•		
	informat	tion					
45.	Add the do	lar value of all of y	our entries from Part 5,	including any entries	for pages you have attache	d	
	for Part 5. \	Write that number	here			→	\$0.00
Par	t 6: Dose	ribo Any Farm- :	and Commercial Fig	hing Pointed Draw	erty You Own or Have a	Indoned Iv	
ı aı	If you	own or have an int	erest in farmland, list it	in Part 1.	erty tou Own or mave a	an interest in.	n.
46.			***************************************		cial fishing-related property?	<b>)</b>	
	No. Go t	o Part 7.	•	<b>y</b>			
	Yes. Go						
	•						Current value of the portion you own?
							Do not deduct secured
				·			alaims priexemptions.
47.	•						
	Examples:	Livestock, poultry, f	arm-raised fish	os. 4.1	· ·		
	Yes	1					•
	103						
48.	Crops—eitl	her growing or ha	rvested				
	☑ No	•	i				
	Yes. Giv	e specific				1	
		ion					
eritalitelessena	······································	***************************************					

Debtor 1

Debtor 2

	otor 1 otor 2	Case 18 Amanda	3-26781	Doc 1	Fil <b>@dn@@#2</b> 4/18 <b>Dkaderen</b> ent	Entero Page 1		8 14:30:46	Desc Main	
YA'dali malayini		First Name	Mid	dle Name	Last Name	raye I	UI_30	Case number (if i	known)	
49	Farm and	tishing og rinm	ant împleme	ate machinon	fixtures, and tools of	•				
,	☑ No	nomig equipm	one impiemei	16, FIRGINIE, y	, iixwies, and toois or	uaqe				
		***************************************				······································				
50.	Farm and	fishing supplies	s, chemicals, a	and feed						
	<b>☑</b> No									
	Yes	**********					<del></del>			
			<u> </u>							
51.	Any farm-	and commercia	t fishing-relate	ed property yo	u did not already list					
	☑ No	ive specific					***************************************			
		ation								
52.	Add the d	ollar value of all	of your entrie	s from Part 6,	including any entries f	or pages you	have attached			
	IOI Part 6.	. write that num	ber nere			144441   P##   <b>144</b> 14   4444	***********************	<del>→</del>		\$0.00
								,		
Par	i 74 Des	cribe Ali Pro	perty You (	or Have	an Interest in Th	at You Did	Not List Abo	ove		
53.		ve other proper			ready list?					
		Season tickets	, country club	membership						
	☑ No ☐ Yes. Gi	ive specific		·····				***************************************		:
	informa	ation								
										·····
54.	Add the do	ollar value of all	of your entrie	s from Part 7.	Write that number her	e	***************************************	→		\$0.00
	·	•							· · · · · · · · · · · · · · · · · · ·	
Par	t 8: List	the Totals of	Each Part	of this For	m					
55.	Part 1: Tota	al real estate, lin	e 2				***************************************	→ 1 1 1	. 1. 1.	290,000.00
	_									200,000
56.	Part 2: Tota	al vehicles, line (	5			\$36,100.00				-
57.	Part 3: Tota	al personal and l	household ite	ms, line 15		\$4,200.00				· · · · · · · · · · · · · · · · · · ·
		52								**************************************
58.	Part 4: Tota	al financial asset	s, line 36		<del></del>	\$2,900.00				
59.	Part 5: Tota	al business-relat	ed property, li	ne 45		\$0.00				
				,		40.00				
60.	Part 6: Tota	al farm- and fish	ing-related pr	operty, line 52		\$0.00				
<del>5</del> 1.	Part 7: Tota	al other property	not listed lin	ne 54	ш	40.00			•	
		proporty	- not itsustif fill		Τ	\$0.00	,			MWeenshares
62.	Total perso	nal property. Ad	d lines 56 thro	ugh 61		43,200.00	Copy personal	property total →	+\$43.	200.00
					t			-	, -	

Debtor 1

Debtor 1 Debtor 2	CESE 18-2678 Amanda	1 Doc 1	File <b>@r@@ré2</b> 4/18 D <b>irec</b> ent	Entered 09/24/ Page 18 of 58	/18 14:30:46 Case number <i>(if l</i>		
	First Name	Middle Name	Last Name		Cosc normoci (ii i	anown)	
							TOTAL CONTRACTOR SALES
					* *		
63. Total of all	l property on Schedule A	/B. Add line 55 + I	ine 62	***************************************		\$333.2	00.00
•						·	

Filed 09/24/18 Case 18-26781 Doc 1 Entered 09/24/18 14:30:46 Desc Main Fill in this information to identify your case: Debtor 1 Canizares First Name Middle Name Last Name Debtor 2 Amanda Lederer (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: **Northern District of Illinois** Case number Check if this is an (if known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Bulef description of the property and line on Current value of the America of the exemption you claim. Specific laws that allow exemption Safacillie (Maytfült febel file propert) Docytre value non rk orliverië hak for each exemption Brief description: 735 ILCS 5/12-1001(b) Household goods and furnishings \$650.00 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief description: 735 ILCS 5/12-1001(b) Television, Computer \$300.00 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) **☑** No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No☐ Yes

Case 18-26781 Doc 1 Filed 09/24/18 Entered 09/24/18 14:30:46 Desc Main

Debtor 1 Debtor 2 Cesar Document Page 20 of 58

Amanda Lederer Case number (if known)

First Name Middle Name Last Name

Tale 2. Additional rage	•		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you sum:	Arresum of the exemption you claim  Check only one tox (of each exemption	Specific laws that allow exemption
Brief description: Clothes Line from Schedule A/B:11	\$250.00	\$250.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description:  Wedding Ring  Line from  Schedule A/B: 12	\$3,000.00	\$3,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Bank of America Checking account Line from Schedule A/B: 17	\$1,400.00	\$1,400,00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Bank of America Checking account Line from Schedule A/B: 17	\$1,500.00	\$1,500.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Fill in this information to identify your case:		4/18 14:30:46	Desc Main	
Debtor 1 Cesar	Document Page ZI or 38			
	Canizares  Idle Name Last Name			
Debtor 2 Amanda				
(Chause If the -)	Lederer Idle Name Last Name			
United States Bankruptcy Court for the:	Northern District of Illinois			
	NOCTION DISUICE OF IMPOS			
Case number (if known)			Check if this is an amended filing	
Official Form 106D				
Schedule D: Creditors V	Who Have Claims Secured	hy Proporty		
				2/15
recrea, copy the Additional Page, Illi it out, humi	narried people are filing together, both are equally respon per the entries, and attach it to this form. On the top of an	sible for supplying con y additional pages, wri	rect information. If more spac te vour name and case numb	e is er (if
diowity.			y	(ii
Do any creditors have claims secured by your p	•			
No. Check this box and submit this form to the	court with your other schedules. You have nothing else to re	port on this form.		
Yes. Fill in all of the information below.				
Part 1: List All Secured Claims				
2. List all secured claims: If, a creditor has more t	nan one secured claim, list the creditor separately for each	Zina .	Course & Course	ı C
claim. If more than one creditor has a particular list the claims in alphabetical order according to	claim, list the other creditors in Part 2. As much as possible	Amount of claim	Value of the Continues	
The Committee of State of Committee of the Committee of t		Donos dedica de la value de constancia de co	collateral that portion  Supports this ""   arm	1
		or complete to the	SUPPORTS UIS   Farty.	
2.1 Associated Bank Creditor's Name	Describe the property that secures the claim:	\$293,213.00	<u>\$290,000.00</u> \$3,	213.00
200 N Adams St	2929 N Moody Ave Chicago, IL 60634-5027			-
Number Street	-			
Green Bay, WI 54301-5142	As of the date you file, the claim is: Check all that apply.	••••		
City State ZIP Code  Who owes the debt? Check one.	Contigent			
Debtor 1 only	Uniquidated			
Debtor 2 only	☐ Disputed			
☑ Debtor 1 and Debtor 2 only	Nature of lien. Check all that apply.			
At least one of the debtors and another	An agreement you made (such as mortgage or secured car loan)			
☐ Check if this claim relates to a	Statutory lien (such as tax lien, mechanic's lien)			
community debt	Judgment lien from a lawsuit			
Date debt was incurred 04/2017	Other (including a right to offset)	_		
	Last 4 digits of account number 4 0 8 3			i
Add the dellers	nn A on this page Write that number here.			Marianna magay

Debtor 1 Debtor 2 Case 18-26781 Doc 1 File Grips 24/18 Entered 09/24/18 14:30:46 Desc Main Amarka First Name Middle Name Description Page 22 of 58 Case number (if known)

Additional Page  Part 1:  After listing any entries on with 2.3, followed by 2.4, a	this page, number them beginning and so forth.	Amount of claim V Or needed active C value of collaboral S	alue of Un	urne (C. Secured tion N
2.2 DMK Express Inc Creditor's Name 6601 S Menard Ave Number Street Bedford Park, IL 60638-6209 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	As of the date you file, the claim is: Check all that apply.  Contigent Unlquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	Linknown	\$0.00	\$0.00
Add the dollar value of your entries in Colun  If this is the last page of your form, add the o	· · · · · · · · · · · · · · · · · · ·	\$0.00 \$293,213.00		

Fill in this information t	o identify voer case:				24/18 14:30:46	Desc Main
	, , , , , , , , , , , , , , , , , , , ,		Document	Page 23 or :		Desc Main
Debtor 1	Cesar		Canizares	1 agc 25 01 .	30	
	First Name	Middle Name	Last Name			
Debtor 2	Amanda		Lederer			
(Spouse, if filing)	First Name	Middle Name	Last Name	···		
Market Book Book			Last Warne			
United States Bankru	ptcy Court for the:		Northern District of I	llinois		
Case number					İ	☐ Check if this is an
(if known)						amended filing
······································		· · · · · · · · · · · · · · · · · · ·				
Official Form	106F/F		•			·
						•
Schedule E	:/F: Credit	ors Who	Have Uns	ecured Ci	aime	
						12/15
oc as complete and ac	curate as possible. U	se Part 1 for cred	litors with PRIORITY	claims and Part 2 for	creditors with NONPRIOR	ITY claims. List the other party to
						claims that are listed in <i>Schedule</i> es in the boxes on the left. Attach
the Continuation Page	to this page. On the	top or any additio	mai pages, write you	r name and case nun	nber (if known).	
Part 1: List All of	Your PRIORITY	linsocured Ct	sime			
<ol> <li>Do any creditors I</li> </ol>	nave priority unsecur	ed claims against	t you?			
No. Go to Part	12.					
☐ Yes.	CONSTRUCTOR CONTRACTOR					
<ol><li>Listall of your pri</li></ol>	only unsecured clain	is. If a creditor has	s more than one priori	y unsecured claim, lis	t the creditor separately for	each claim. For each claim listed,
			re creators name, if y st the other creditors i		o priority unsecured claims	nphorny amounts. As much as fill out the Continuation Page of
<ul> <li>(For an explanation</li> </ul>	rofeach type of claim	, see the instruction	ins for this form in the	instruction booklet.)		
					ica .	- December 1
					ctaisn	Priority Nonpolotity Smount amount
			lant dallara er			
Priority Creditor's	Name		Last 4 digits of acc			
			When was the deb		· · · · · · · · · · · · · · · · · · ·	*****
Number St	reet		As of the date your	file, the claim is: Che	ck all that	
		<del></del>	apply.  Contingent			
City.		<del></del>	Unliquidated			
City	State	ZIP Code	☐ Disputed			
Who incurred the	he debt? Check one.		•		•	•
Debtor 1 only Debtor 2 only			Type of PRIORITY I	unsecured ciaim;		
Debtor 1 and			Tayos and corto	ort obligations in other debts you owe	. at-	•
At least one of	of the debtors and ano	ther	government	in other debts you owe	eine	
Check if this	claim is for a comm	unity deht		n or person injury while	9 VOLUMORA	
Is the claim subj			_ intoxicated	· · · bereer uiter 2 stem	- Jou word	
☐ No	oce to onset?		Other. Specify			
☐ Yes			. ,			·

Debtor 1 Debtor 2	Casar 18-2678	1 Doc 1	D. A. Bederer Cont	Entered 09/24/18 Page 24-of 58		
	First Name	Middle Name	Last Name	<del>raye 24-</del> 01 56	Case number (if k	nown)

Par	t 2: List All of Your NONPRIORITY Unsecured C	laims	
3.	Do any creditors have nonpriority unsecured claims against	Word?	······································
A CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR	<ul> <li>No. You have nothing to report in this part. Submit this form</li> <li>         ✓ Yes.     </li> </ul>	to the court with your other schedules.	
4			
4.	List all of your nonpriority unsecured claims in the alphabeti	cal order of the creditor who holds each claim. If a creditor has more than or	ie nonpriority
1627782	ul acculeu dan il list ule treului sepalalen ibi each maim war	earth claim listen, identify what hop of claim it is. Do not list claims already was	and and the Police of the co
	нато не оточки повоз и рагисанальский, изглие одна слесиоть. Рап. 2.	in Part 3. If you have more than three nonpriority unsecured claims fill out the (	Continuation Page of
			lotal claim
4.1	Bank of America	Last 4 digits of account number	\$17,387.00
	Nonpriority Creditor's Name	When was the debt incurred? 09/01/2005	
	Po Box 1598  Number Street	As of the date you file, the claim is: Check all that apply.	
	Norfolk, VA 23501-1598	Contingent	
	City State ZIP Code	Unliquidated	
		☐ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only  Debtor 1 and Debtor 2 only		
		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	Other. Specify	
	☑ No	Credit Card	
	☐ Yes		the second second
4.2	Chase Card	Last 4 digits of account number 0111	\$10,595.00
	Nonpriority Creditor's Name		
	POB 78	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Emporia, VA 23847	☐ Contingent ☐ Unliquidated	
	City State ZIP Code	• • • • • • • • • • • • • • • • • • • •	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	C. 100 (1)
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	Is the claim subject to offset?	Other. Specify	
	☑ No	Credit Card	
	☐ Yes		
4.3	Deville Asset Management		AT 000 00
	Nonpriority Creditor's Name	Last 4 digits of account number 251	\$7,229.00
	1132 Glade Rd	When was the debt incurred? 12/01/2017	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Colleyville, TX 76034	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	No	Collection	
	☐ Yes		
Maria and a supply		TO COMPANY OF THE PROPERTY OF	

Debtor 1 Debtor 2 Case 18-26781 Doc 1 Filed 09/24/18 Entered 09/24/18 14:30:46 Desc Main Page 25 of 58

Amanda

First Name Middle Name Last Name

Case number (if known) _

Part	2: Your NONPRIORITY Unsecured Claims - Continu	uation Page
After	listing any entries on this page, number them beginning with a	5, followed by 4.6, and so forth.
4.4	Portfolio Recovery Associates	Last 4 digits of account number \$411.00
	Nonpriority Creditor's Name	When was the debt incurred? 04/01/2015
	Po Box 12914 Number Street	As of the date you file, the claim is: Check all that apply.
		Contingent
	Norfolk, VA 23541-0914 City State ZIP Code	☐ Unliquidated
	Who incurred the debt? Check one.	Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or
	At least one of the debtors and another	divorce that you did not report as priority claims
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	☑ Other. Specify
	☑ No	Collections
A	☐ Yes	
4.5	U.S. Department of Education	Last 4 digits of account number 2013 \$7,170.00
	Nonpriority Creditor's Name	When was the debt incurred?
	101 Marietta Number Street	As of the date you file, the claim is: Check all that apply.
	Atlanta, GA 30323	Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or
	At least one of the debtors and another	divorce that you did not report as priority claims
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	Other. Specify
	<b>☑</b> No	
**************************************	☐ Yes ·	
4.6	U.S. Department of Education	Last 4 digits of account number \$4,123.00
	Nonpriority Creditor's Name	When was the debt incurred? 09/01/2013
	101 Marietta Number Street	As of the date you file, the claim is: Check all that apply.
	Atlanta, GA 30323	Contingent
	City State ZIP Code	☐ Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	M Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or
	At least one of the debtors and another	divorce that you did not report as priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	s the claim subject to offset?	Other. Specify
	☑ No	1 · J
Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Compan	Yes	
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	

Debtor 1	
Debtor 2	

First Name

Is the claim subject to offset?

☑ No Yes Middle Name

Case 18-26781 Filed 09/24/18 Entered 09/24/18 14:30:46 Doc 1 Desc Main Page 26 of 58 Case number (if known).

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page							
After listing any entries on this page, number them beginn	ing with 4.5, followed by 4.6, and so forth.						
A.7 Zales Nonpriority Creditor's Name  375 Ghent Rd Number Street Akron, OH 44333	Last 4 digits of account number\$3,880.00  When was the debt incurred?						
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	<ul> <li>☐ Unliquidated</li> <li>☐ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other</li> </ul>						

Other. Specify Credit Card

Debtor	1
Debtor	2

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Amar	nda

First Name

Middle Name

Last Name

Case number (if known) _

\$0.00

\$0.00

\$0.00

\$0.00

Part 4:	Add	the	Amounts f	or	Each	Туре	of	Unsecured	Claim

<b>5</b> .	Total the amounts of certain types of unsecured claims.	This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for eacl
	type of unsecured claim.	solution is to substituting purposes oray, 26 U.S.C. 9 159. Add the amounts for each

			Total
Total claims	6a. Domestic support obligations	6a.	
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	
	6c. Claims for death or personal injury while you were intoxicated	6c.	<del></del> .
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d	+
Carlo Salarya Carlo Salarya	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	
			Total
Total claims	6f. Student loans	<b>6</b> f.	
from Part 2	6g. Obligations arising out of a separation	6a.	

6f. Student loans	6f.	\$11,293.00
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <b>_</b>	\$0.00
6h. Debts to pension or profit-sharing plans, and other similar debts	6h	\$0.00
Other. Add all other nonpriority unsecured claims.  Write that amount here.	6i + _	\$39,502.00
6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$50,795.00

Debtor 1	to identify your case:			24/18 14:30:	46 Desc Main
DODIOI 1	Cesar	····	Document Canizares	Page 28 of 58	2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	First Name	Middle Name	Last Name		
Debtor 2	Amanda		Lederer		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankn	uptcy Court for the:		Northern District of	Illinois	
Case number					Check if this is an
					amended filing
Official Form	106G	· · · · · · · · · · · · · · · · · · ·			
		ory Cont	racts and	Unexpired Leases	
e as complete and a	Courate as nossible	If two married nee	nlo ere filme to the	1 - 11 - 11	1
eded, copy the addi	itional page, fill it out	, number the entri	ies, and attach it to th	r, both are equally responsible for supplyir his page. On the top of any additional page	lg correct information. If more spaces, write your name and case number
					y
Do you have any	executory contracts	or unexpired lease	es?		
No. Check this	box and file this form	with the court with	your other schedules.	You have nothing else to report on this form.	
▼ Yes. Fill in all o	of the information belo	w even if the contra	acts or leases are liste	ed on Schedule A/B: Property (Official Form	IO6A/R)
vehicle lease, cell	on person or compar <b>phone).</b> See the instri	<b>1y Will1 Whom you</b> Octions for this form	have the contract or	lease. Then state what each contract or lea	se is for (for example, rent,
	Priorioji oco u lo il laut	action is for this form	THE INSTRUCTION DOO	lease. Then state what each contract or lea klet for more examples of executory contracts	and unexpired leases.
Downey of the			encolumnos estado		
	y Will Whom you be		<b>用</b> 基本的企业共和国	State what the contract or lease is fa	<b>一种哲学的一种工作。</b>
DMK Express Inc				2007 Volvo Semi Trailer	
Name	:	<del></del>	<del>.</del>	Contract to be ASSUMED	
6601 S Menard A	uro.				
OUT O MICHELLA	<u>ve</u>				
	et .				
Number Stree				<u>.                                    </u>	
	0638-6209	7IP Code		· · · · · · · · · · · · · · · · · · ·	
Number Stree Bedford Park, IL 6		ZIP Code			
Number Street Bedford Park, IL 6 City	0638-6209	ZIP Code		2018 Chevy Equinox	
Number Stree Bedford Park, IL 6	0638-6209	ZIP Code		2018 Chevy Equinox Contract to be REJECTED	
Number Stree  Bedford Park, IL 6  City  GM Financial  Name	0638-6209	ZIP Code		2018 Chevy Equinox Contract to be REJECTED	
Number Stree  Bedford Park, IL 6  City  GM Financial	0638-6209 State	ZIP Code		2018 Chevy Equinox  Contract to be REJECTED	
Number Stree  Bedford Park, IL 6  City  GM Financial  Name  Po Box 181145  Number Stree	0638-6209 State	ZIP Code		2018 Chevy Equinox Contract to be REJECTED	
Number Stree Bedford Park, IL 6 City  GM Financial  Name Po Box 181145	0638-6209 State			2018 Chevy Equinox Contract to be REJECTED	
Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Stree Arlington, TX 7609	0638-6209 State	ZIP Code		2018 Chevy Equinox Contract to be REJECTED	
Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Stree Arlington, TX 7609	0638-6209 State			Contract to be REJECTED  2018 Audi Q5	
Number Stree  Bedford Park, IL 6  City  GM Financial  Name Po Box 181145  Number Stree  Arlington, TX 7600  City	0638-6209 State			Contract to be REJECTED	
Number Stree  Bedford Park, IL 6  City  GM Financial  Name  Po Box 181145  Number Stree  Arlington, TX 7608  City  VW Credit	0638-6209  State  t 96-1145  State			Contract to be REJECTED  2018 Audi Q5	
Number Stree  Bedford Park, IL 6  City  GM Financial  Name  Po Box 181145  Number Stree  Arlington, TX 7600  City  VW Credit  Name	0638-6209  State  t 96-1145  State			Contract to be REJECTED  2018 Audi Q5	
Number Street Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Street Arlington, TX 7609 City  VW Credit Name 1401 Franklin Blvd Number Street Libertyville, IL 6004	0638-6209 State  t 96-1145 State			Contract to be REJECTED  2018 Audi Q5	
Number Street Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Street Arlington, TX 7609 City  VW Credit Name 1401 Franklin Blvd Number Street Libertyville, IL 6004	0638-6209 State  t 96-1145 State			Contract to be REJECTED  2018 Audi Q5	
Number Street Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Street Arlington, TX 7609 City  VW Credit Name 1401 Franklin Blvd Number Street Libertyville, IL 6004	0638-6209  State  t 96-1145  State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
Number Street Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Street Arlington, TX 7604 City  VW Credit Name 1401 Franklin Blvd Number Street Libertyville, IL 6004 City	0638-6209  State  t 96-1145  State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
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Number Street Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Street Arlington, TX 7609 City  VW Credit Name 1401 Franklin Blvd Number Street Libertyville, IL 6004 City  Name Number Street	0638-6209  State  t 96-1145  State  18  State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
Number Street Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Street Arlington, TX 7609 City  VW Credit Name 1401 Franklin Blvd Number Street Libertyville, IL 6004 City  Name Number Street	0638-6209  State  t 96-1145  State  8 State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
Number Street  Bedford Park, IL 6  City  GM Financial  Name Po Box 181145  Number Street  Arlington, TX 7609  City  VW Credit  Name 1401 Franklin Blvd  Number Street  Libertyville, IL 6004  City  Name  Number Street	0638-6209  State  t 96-1145  State  8 State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
Number Street  Bedford Park, IL 6  City  GM Financial  Name Po Box 181145  Number Street  Arlington, TX 7600  City  VW Credit  Name  1401 Franklin Blvd  Number Street  Libertyville, IL 6004  City  Name  Number Street  City	0638-6209  State  t 96-1145  State  8 State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
Number Street  Bedford Park, IL 6  City  GM Financial  Name Po Box 181145  Number Street  Arlington, TX 7600  City  VW Credit  Name  1401 Franklin Blvd  Number Street  Libertyville, IL 6004  City  Name  Number Street  City	0638-6209  State  t 96-1145  State  8 State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
Number Street  Bedford Park, IL 6  City  GM Financial  Name Po Box 181145  Number Street  Arlington, TX 7600  City  VW Credit  Name 1401 Franklin Blvd  Number Street  Libertyville, IL 6004  City  Name  Number Street  City  Name  Number Street  City	0638-6209  State  t 96-1145  State  8 State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	
Number Street  Bedford Park, IL 6 City  GM Financial Name Po Box 181145 Number Street Arlington, TX 7600 City  VW Credit Name 1401 Franklin Blvd Number Street Libertyville, IL 6004 City  Name  Number Street City	0638-6209  State  t 96-1145  State  8 State	ZIP Code		Contract to be REJECTED  2018 Audi Q5	

					_	
Fill in this information	to identify your case:				24/18 14:30:46	Desc Main
Debtor 1	Cesar		Document Canizares	Page 29 or :	<b>5</b> 8	
	First Name	Middle Name	Last Name			
Debtor 2	Amanda		Lederer	•		
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankri	uptcy Court for the:	-	Northern District of	Illinois		• •
Case number (if known)		·	e e	, ,	1.2	Check if this is an amended filing
Official Form	106H	· · · · · · · · · · · · · · · · · · ·	-		J	
Schedule	H: Your Co	debtors				40ist
odebtors are people	or entities who are a	lso liable for any d	ehte vou may have	Po on normalista and a		12/15 married people are filing together,
oth are equally respo he left. Attach the Add	onsible for supplying ditional Page to this i	COTTECT information	on. If more space is r	needed, copy the Addi	curate as possible, if two itional Page, fill it out, and nd case number (if known)	married people are filing together, number the entries in the boxes on
					to case number (if known)	. Answer every question.
1. <b>Do you have any</b> <b>☑</b> No	oocolors: (ii you di	e ming a joint case,	do not list eitner spoi	use as a codebtor.)		
☐Yes						
	lears have you lived	in a community				
Louisiana, Nevada	, New Mexico, Puerto	Rico, Texas, Wash	ington, and Wisconsi	<b>ory?</b> ( <i>Community prop</i> n.)	erty states and territories in	clude Arizona, California, Idaho,
₩ No. Go to line 3	3.					
Yes. Did your s	pouse, former spouse	, or legal equivalent	: live with you at the tir	me?		
☐ No						
Yes. In whic	h community state or t	territory did you live?	?		the name and current addr	ess of that person
·						oso or that porsoni.
Name					:	
Number	Street	<del></del>	<del></del>	· ·		
	Street	·				
City		State ZIP Code				
In Column 1, list a	il of your codebtors.	Do not include you	ur spouse as a codel	btor if your spouse is:	filing with you. List the no	son shown in line 2 again as a
Form 106F/F) or	iat person is a guara Schedulo G (Official D	ntor or cosigner. N	lake sure you have I	isted the creditor on :	Schedule D (Official Form	son shown in line 2 again as a 106D), <i>Schedule E/F</i> (Official
	A CONTROL O	Om 1003), USE 3	cneaule D, Scheaule	E/F, or Schedule G to	fili out Column 2.	
AULTA TOURS	deptor a spanish	Salahin Kaling	医阴茎性阴道 的复	entre publication de	kan i Tin Lindia tawa	On you own the data
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Name						
Number Street					Schedule E/F, line	
				Į.	Schedule G, line	<del></del>
City	State	710.0-1				

Official Form 106H

Schedule H: Your Codebtors

page 1 of 1

	n to identify your co	(Se:		24/18	14:30:46 Desc Main
Debtor 1	Cesar		ument Page 3		
	First Name		st Name	<del></del>	·
Debtor 2	Amanda	L	ederer		
(Spouse, if filing)	First Name		st Name		Check if this is:
United States Bankr	ruptcy Court for the	Norther	n District of Illinois		An amended filing
Case number				<del></del>	A supplement showing postpetition
(if known)					chapter 13 income as of the following
			<del> </del>	<u></u>	MM/DD/YYYY
Official Forn	ท 106เ				WWW/DD/1111
	···				
Schedule			·		1
pouse is not filing wi	ith you, do not ind e your name and d	filing jointly, and your spous clude information about your case number (if known). Answ	one was firmers and include	e information abou needed, attach a s	are equally responsible for supplying correct it your spouse. If you are separated and your eparate sheet to this form. On the top of any
Fill in your emplo information.	pyment		-Depter 1		Dubnik 2 or nor ning sporse
If you have more the attach a separate information about employers.	page with	Employment status	☐ Employed <b>☑</b> Not Emp	loyed	☐ Employed <b>☑</b> Not Employed
· -		Occupation			
Include part time, s self-employed work	seasonal, or k.	Employer's name			
seirempluyeu wor					the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon
Occupation may in or homemaker, if it	nclude student t applies.	Employer's address	Number Street		Number Street
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Occupation may in	nclude student t applies.	Employer's address  How long employed there?		ate Zip Code	Number Street  City State Zip Code
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Occupation may in or homemaker, if it art 2: Give Deta  Estimate monthly are separated.	ails About Mor	How long employed there?  Ithly Income  date you file this form. If you h	City St	y line, write \$0 in th	City State Zip Code e space. Include your non-filing spouse unless you on on the lines below. If you need more space,
Occupation may in or homemaker, if it are separated. If you or your non-fil attach a separate si	ails About Mor income as of the iling spouse have n heet to this form,	How long employed there?  Ithly Income  date you file this form. If you it note than one employer, combined to the commissions (before all page)	City St	y line, write \$0 in th Oloyers for that pers	City State Zip Code e space. Include your non-filing spouse unless you on on the lines below. If you need more space, For Pernor 2 or Transfiling spouse
Occupation may in or homemaker, if it art 2: Give Deta  Estimate monthly are separated. If you or your non-fil attach a separate si	ails About Mon income as of the iling spouse have n heet to this form,	How long employed there?  Athly Income  date you file this form. If you have than one employer, combined the commissions (before all pay ate what the monthly wage would be commissions).	City St	y line, write \$0 in th Dioyers for that pers	City State Zip Code e space. Include your non-filing spouse unless you on on the lines below. If you need more space,

Debtor 1 Debtor 2

First Name

Middle Name

Case 18-26781 File**@ 19/2**4/18 Detiment Last Name Entered 09/24/18 14:30:46 Desc Main Doc 1 Page 31 of 58 Case number (if known) _

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***************************************	Copy line 4 here	4.	\$0.00		\$0.00	
5.	List all payroll deductions:				\$0.00	
- Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Constitution of the Cons	5a. Tax, Medicare, and Social Security deductions	5a,	\$0.00		\$0.00	
	5b. Mandatory contributions for retirement plans	5a. 5b.	\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans		\$0.00		\$0.00	
The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon	5d. Required repayments of retirement fund loans	5c.	\$0.00		\$0.00	
	5e. Insurance	5d.	\$0.00		\$0.00	
	5f. Domestic support obligations	5e.	\$0.00			
statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statement of the statem	5g. Union dues	5f.	\$0.00		\$0.00	
		5g.	+ \$0.00	+	\$0.00	
6.	5h. Other deductions. Specify:	5h.		•	\$0.00	
	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0,00		\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		\$0.00	
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			. •		
	8b. Interest and dividends	8a.	\$3,368.00		\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b.	\$0.00		\$0.00	·
	Include alimony, spousal support, child support, maintenance, divorce					
	settlement, and property settlement.	8c.	\$0.00		\$0.00	
	8d. Unemployment compensation	8d.	\$0.00		\$0.00	
	8e. Social Security	<b>8</b> e.	\$0.00		\$0.00	
	8f. Other government assistance that you regularly receive		•			
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00		\$0.00	
	8g. Pension or retirement income	8g.	\$0.00		\$0.00	
	8h. Other monthly income. Specify:	8h.	+\$0.00	+	\$0.00	•
	эреспу.	011.		· ·	<u> </u>	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h,	9.	\$3,368.00		\$0.00	
10.	Calculate monthly income. Add line 7 + line 9.			' -		
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$3,368.00	+	\$0.00	= \$3,368.00
11.	State all other regular contributions to the expenses that you list in Schedule J.	, ,		· L		
	Include contributions from an unmarried partner, members of your household, your defriends or relatives.	epender	nts, your roommates, an	d other	r	
	Do not include any amounts already included in lines 2-10 or amounts that are not av	/ailable t	to nav evnenses listed in	Scho	dulo t	
	Specify:			_	11 +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The result	t is the c	combined monthly incon	ne. Wrii	ite that	
	amount on the Summary of Your Assets and Liabilities and Certain Statistical Information	ation, if i	it applies		12.	\$3,368.00
						Combined
10	Designation		•		* -	monthly income
13.	Do you expect an increase or decrease within the year after you file this form?					
	☐ Yes. Explain;		· · · · · · · · · · · · · · · · · · ·			
			<del></del>			

Debtor	1	
Debtor	2	

Case 18-26781 Doc 1 File (2009) 624/18 Entered 09/24/18 14:30:46 Desc Main Amanda Description Page 32 of 58 Case number (if known) _______

THE SAME PROPERTY AND ADDRESS OF THE SAME PARTY.			
8a. Atta	iched Statement		deren vermenzen der Spille in dem men vermen der Andreas verschen der Andreas verschen der Andreas verschen der
	Marvel C Transportation dba C	esar Canizares	
FINAN	CIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information		
PART	A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:	y	
1	Gross Monthly Income:		\$10,000,00
PART	3 - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:		<b>\$10,000.00</b>
2	Ordinary and necessary expense		
3	Net Employee Payroli (Other than debtor)		
4	Inventory Purchases (Including raw materials)		
5	Purchase of Feed/Fertilizer/Seed/Spray		
6	Rent (Other than debtor's principal residence)		
7	Utilities		
8	Office Expenses and Supplies	\$300.00	
9	Repairs and Maintenance	\$1,333.00	
10	Vehicle Expenses	\$4,999.00	
11	Travel and Entertainment	Ψ4,000.00	
12	Equipment Rental and Leases		
13	Legal/Accounting/Other Professional Fees		
14	Insurance		
15	Employee Benefits (e.g., pension, medical, etc.)	**************************************	
16	Payroll Taxes		
17	Unemployment Taxes		
. 18	Worker's Compensation		
19	Other Taxes		
20	Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts	\$0.00	
21	Other.	\$0.00	
	TOTAL MONTHLY EXPENSES(Add item 2 - 21)		\$6,632.00
PART C	- ESTIMATED AVERAGE NET MONTHLY INCOME:	And the second	

23 AVERAGE NET MONTHLY INCOME (Subtract item 23 from item 1)

\$3,368.00

Fi	If in this information to	identify your case:		24/18	14:30:46 I	Desc Main
ſ	Debtor 1	Cesar	Documen Canizares	rage 33 or 5 <mark>8</mark>		•
•		First Name	Middle Name Last Name	Chec	k if this is:	
	Debtor 2	Amanda	Lederer		amended filing	
(	Spouse, if filing)	First Name	Middle Name Last Name	□A:	supplement showing	postpetition
į	Jnited States Bankrupt	tcy Court for the:	Northern District	i_	apter 13 income as	of the following date:
	Case number f known)			M	M/DD/YYYY	-
O	fficial Form	106.J				
	chedule J:		nansas			
3e 1ee	as complete and accorded, attach another s	urate as possible. sheet to this form.	If two married people are filing toge On the top of any additional pages,	ther, both are equally responsible fo write your name and case number	or supplying correc (if known). Answer	t information. If more space is every question.
ľ	Pri 1: Describe Y	our Household				
1.	Is this a joint case?	1				
	No. Go to line 2.					
	Ves. Does Debto	or 2 live in a separa	ate household?			
	<b>∑</b> No □ves D	obtor 2 must file Of	Ficial Form 100 LO. Formando G. G.	· · · · · · · · · · · · · · · · · · ·		
2.	Do you have depen		fficial Form 106J-2, Expenses for Sep	parate Household of Debtor 2.		
۲.	Do not list Debtor 1 a		□ No	Dependent's relationship to	Dependent's	Dago demandant live
	Debtor 2.		✓ Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	Does dependent live with you?
	Do not state the depe	endents' names.	•	Olella	-	□ No. <b>☑</b> Yes.
			•	Child	<u>Minor</u>	_ □No
						¯ <b>□</b> Yes
						□ No - □ Yes
		•			- Para	■No
						- □Yes □No
~~~~	So unu no company		<b>∑</b> ÍNo			T Pyes
J.	Do your expenses ir of people other than your dependents?	iciude expenses i yourself and	¥ No ☐Yes			• •
Pa	rt 2: Estimate Y	our Ongoing M	lonthly Expenses			
Es	imate your expenses	as of your bankru	uptcy filing date unless you are usin	g this form as a supplement in a Ch	anter 13 case to re	nort evnences as of a data after
the	bankruptcy is filed. I	f this is a supplem	nental Schedule J, check the box at	the top of the form and fill in the ap	plicable date.	host exherises as at a date affet.
nc suc	lude expenses paid fo th assistance and ha	or with non-cash or with non-cash or some state or some st	government assistance if you know Schedule I: Your Income (Official Fo	the value of rm 106i.)	N. P. C.	X EXPERSES IN THE REAL PROPERTY.
1.	The rental or home of ground or lot.	ownership expens	es for your residence. Include first m	ortgage payments and any rent for the	e 4	\$1,940.00
	If not included in line	e 4:				
	4a. Real estate taxes				4a.	\$0.00
	4b. Property, homeow	ner's, or renter's in	surance	•	4b.	\$0.00
	4c. Home maintenanc				4c.	\$100.00
	4d. Homeowner's ass		•		4d.	
		50110011				\$0.00

Debtor 1 Debtor 2

C_A

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File **Graph** 18

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30:46 Desc Main

page 2

Case number (if known). First Name Middle Name Additional mortgage payments for your residence, such as home equity loans 5. 6. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$300.00 6b. Water, sewer, garbage collection 6b. \$50.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6¢. \$375.00 6d. Other. Specify: 6d. \$0.00 Food and housekeeping supplies 7. \$600.00 Childcare and children's education costs 8. 8. \$50.00 9. Clothing, laundry, and dry cleaning 9. \$100.00 Personal care products and services 10. 10. \$50.00 Medical and dental expenses 11. 11. \$300.00 Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. 12. \$200.00 Entertainment, clubs, recreation, newspapers, magazines, and books 13. 13. \$50.00 Charitable contributions and religious donations 14. 14. \$0.00 15. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$980.00 15c. Vehicle insurance 15c. \$190.00 15d. Other insurance. Specify: _ 15d. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$640.00 17b. Car payments for Vehicle 2 17b. \$560.00 17c. Other, Specify: _ 17c. 17d. Other. Specify: . 17d. 18. Your payments of alimony maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$0.00 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20e. Homeowner's association or condominium dues 20e. Official Form 106J \$0.00 Schedule J: Your Expenses

	otor 1 Case 18-26781 Doc 1 File Propres 4/18 Entered 09/24 Amanda First Name Middle Name Last Name Page 35 of 58	1/18 14:30:46 C Case number (if know	
<u></u>			
21.	Other. Specify:	21	\$0.00
22.	Calculate your monthly expenses.	***************************************	\$0.00
	22a. Add lines 4 through 21.	22a.	\$6,485,00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add line 22a and 22b. The result is your monthly expenses.	22c	\$6,485.00
23.	Calculate your monthly net income.	L	<
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23 a.	\$3,368.00
	23b. Copy your monthly expenses from line 22c above.	23b	\$6,485.00
	23c. Subtract your monthly expenses from your monthly income.		707,00.00
	The result is your monthly net income.	23c	(\$3,117,00)
24.	Do you expect an increase or decrease in your expenses within the year after you file this form?		
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		

▼No.

Yes.

None

Fill in this information	to identify your case:				3 1 4:30:46	Desc Main
Debtor 1	Cesar		Document Canizares	Page 30 01 58		
	First Name	Middle Name	Last Name			
Debtor 2	Amanda		Lederer			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:		Northern District of	Illinois		
Case number (if known)						Check if this is an
		<u> </u>				amended filing
Official Form	106Sum					
		ente ano	l I iabiliti.		04-45-41	_
Information	oi iodi <u>As</u> n	sers all	LIADIIITIE	es and Certain	Statistic	ai
						12/15
		i two married peo; tion on this form. I	ple are filing together If you are filing amer	r, both are equally responsible	for supplying come	ect information. Fill out all of you you must fill out a new <i>Summar</i> y
and check the box at t	he top of this page.		you are iming arrier	idea scriedales arter you life y	our original torms,	you must till out a new <i>Summar</i> y
Part 1: Summari:	Zo Vour Acocto					
out in the	Le Tour Assets					
		·				
						Your assets Value of wrat vour own
1. Schedule A/B: Pro	nerty (Official Form 1	06A/B)				The state state and state and
	tal real estate, from S					\$290,000,00
					144	Ψ230,000.00
ib. Copy line 62, 10	tal personal property,	from <i>Schedule A/B</i> .	***************************************			\$43,200.00
1c. Copy line 63, To	tal of all property on S	chedule A/B	•••••			\$333,200.00
	•					<u></u>
Part 2: Summaria	ze Your Liabilitie	s _.				•
					· · · · · · · · · · · · · · · · · · ·	
						Your liabilities
		•			•	Amount you owe
2. Schedule D: Credito	ors Who Have Claims	Secured by Prope	erty (Official Form 106	(D)		
				page of Part 1 of <i>Schedule D</i>		\$293,213.00
3. Schedule E/F: Cred					•	
				hedule E/F		\$0.00
so. Copy the total ca	aims from Part 2 (non	priority unsecured (claims) from line 6j of	Schedule E/F		+\$50,795.00
					Your total liabilitie	£ \$244,000,00
Part 3: Summari-	o Vour Income	ad Cara a			. ser total nopille	\$344,008.00
Part 3: Summariz	e rour income a	iu Expenses				
4. Schedule I: Your Inco		•				
Copy your combined	monthly income from I	line 12 of <i>Schedule</i>	L		****	\$3,368.00
5. Schedule J: Your Exp	nences (Official Forms	100 ()				
_	voorses from line 22e	•				

\$6,485.00

Debtor	1	
Dehtor	2	

Case 18-26781 Doc 1 Filed 09/24/18 Entered 09/24/18 14:30:46 Desc Main Page 37 of 58

Amanda

First Name

Middle Name

Last Name

Case number (if known)_

Part 4: Answer These Questions for Administrative and Statistical Records	
6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes	
 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 	
8. From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$2,916.00
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
From Part 4 on Schedule FF, copy the following:	e en en e
9a. Domestic support obligations (Copy line 6a.) \$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00	
9d. Student loans. (Copy line 6f.)	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.)	en en en en en en en en en en en en en e
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) +\$0.00	
9g. Total. Add lines 9a through 9f. \$11,293.00	

Fill in this information	to identify your case:				4/18 14:30:46	Desc Main
Debtor 1	Cesar		Document	Page 38 or 5	δ	
	First Name	Middle Name	Canizares Last Name			
Debtor 2	Amanda		Lederer			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankri	uptcy Court for the:		Northern District o	f Illinois		
Case number					1	
(if known)						Check if this is an amended filing
Official Form	106Dec	_				
· · · · · · · · · · · · · · · · · · ·		n individ	ual Debto	r's Schedu	ulaa	
two married people	are filing together ho	th are equally rec	Demoible for the	ing correct informatio	1162	12/15
						operty, or obtaining money or
Sign Bel	ow					
Did you pay or agre	e to pay someone w	ho is NOT an atton	ney to help you fill o	out bankruptcy forms?		
∑ Í No	•					
Yes. Name of per	son			Attach Banka mto D	-Main-	
·				(Official Form 119).	etition Preparer's Notice, D	eclaration, and Signature
		w.	÷			
11						
Under penalty of pe	rjury, I declare that I h	nave read the sum	mary and schedule	s filed with this declara	ion and that they are true	and correct
X		· · · · · · · · · · · · · · · · · · ·	X			
Cesar Canizares	s, Debtor 1, Debtor 1	•	Amanda	Lederer, Debtor 2		
Date 09/24/2018			Date 09/	24/2010		
MM/ DD/	YYYY	•		24/2018 N DD/ YYYY		
		TANKA TERUTA MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN MANAGAN M				

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Debtor 2 (Spouse, it filing)	Amende	S# -	Lexioner			
	First Name	Middle Name	Last Name	4	'A	
United States Banko	ptcy Court for the	N.	orthern District o	(Illinois		
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i vas uguad bebbie	ne niing together, be	th are equally respons	onsible for supply	ing correct information.	AN AND STATE STATES	Comment of the commen
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Cesar Canizares	Deblor 1, Deblor 1		Amanda	Lédener, Debitor 2		
Date 09/18/2018 MM/ DD/			Dela OS Ma	182018 W 000 YYY Y	, *	**
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	First Name	Middle Name	Last Name			
btor 2 couse, if filing)	Amanda First Name	Middle Name	Lederer Last Name			
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rnown)			,			Check if this is an amended filing
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atement	or Financia	ai Aπai	rs for Indiv	iduals Filing for	Bankru	otcy
complete and acc d. attach a senar:	curate as possible. If the	wo married per	ople are filing together,	both are equally responsible for	supplying correct	information. If more spa
a separe	are street to this lotti.	On the top or a	iny additional pages, wr	both are equally responsible for ite your name and case number	(if known). Answe	r every question.
1: Give Deta	ils About Your Ma	erital Status	and Where You Liv	ved Before		
/hat is your curre	nt marital status?					
Married						
Not married				ı		
	ars, have you lived any	ywhere other th	nan where you live now	· •		
	ars, have you lived any	ywhere other th	nan where you live now:			
No				• •		
☑ No ☑ Yes, List all of the		last 3 years. Do	o not include where you li	ive now.		
☑ No ☑ Yes. List all of the		last 3 years. Do	o not include where you li	• •		Dates Debtor 2 inved
☐ No ☑ Yes. List all of the		last 3 years. Do	o not include where you li tes Debtor 1 lived 18	ive now.		trikere 💯 💮
No Yes. List all of the		last 3 years, Do	o not include where you li tes Debtor 1 lived int	ive now.		
No Yes. List all of the Nation 1:		last 3 years, Dr	o not include where you lites Debice 1 lived 1	ive now. 2500-2 Same as Debtor 1		Same as Debtor 1
No Yes. List all of the Adbtor 1: 59 W. Huren St Imber Street		last 3 years, Do	o not include where you lites Debice 1 lived 1	ive now.		Same as Debtor 1
No Yes. List all of the Nebtor 1: 9 W. Huren St mber Street	places you lived in the	last 3 years. Dr	o not include where you lites Debice 1 lived 1	ive now.		Same as Debtor 1
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ebtor 1	Case 18-26781 Cesar		ed 09/24/18 เพ ณ และ	B Entered 0 Page 41 of	9/24/18 14:30:46 58	Desc Main
ebtor 2	Amanda First Name Mide		derer ast Name		Case number (if k	(nown)
					·	
3. Within the	e last 8 years, did you ever live	e with a spouse or leg	al equivalent in a	community proper	rty state or territory?(Comn	nunity property states and territories
✓ No	ona, California, Idaho, Louisian	a, Nevaua, New Mexico	o, Puerto Rico, Te	exas, Washington, ar	nd Wisconsin.)	
	aka cura yayı fill ayıt Cabadıda	15.7				
103.10	ake sure you fill out <i>Schedule i</i>	7: Your Codebtors (Off	icial Form 106H)			
art 2: Ex	plain the Sources of Yo	ur income				
4. Did you ha	ave any income from employs	ment or from operating	g a business dur	ing this year or the	two previous calendar year	e?
	il amount of income you receiv g a joint case and you have inc) :
☐ No		,	-goulon, mack only	once under Debior	•	
🌠 Yes. Fil	ll in the details.					
		Debtor 1				
		Sources of inco	me Con	se income	To Debtor 2 The Property of the Communication of th	ar de Saparticus majordi (editoria) (editoria)
		Check all that app		ore deductions and	Sources of income Check all that apply	Gross Income (before deductions and
				usions)		exclusions)
From Janu	ary 1 of current year until the	☐ Wages, comm	nissions,		☐ Wages, commissions	· ·
date you fil	led for bankruptcy:	bonuses, tips Operating a bu	rinoco	447 500 0-	bonuses, tips	,
		Experiency a bu	SITIESS	<u>\$17,500.00</u>	Operating a business	
For last cale	-	Wages, comm	issions,		☐ Wages, commissions	,
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	endar year before that: o December 31, 2016)	☐ Wages, commi bonuses, tips	issions,		☐ Wages, commissions,	
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Control (Control (Con			Wednesday Commence of the Comm		Carperating a business	
. Did vou rec	eive any other income during	this year or the hou				
	FIEUdiuless of whether that the	nme is tavable. Evamo	100 of other incre-		support; Social Security une	mployment, and other public benefit
ave income th	nat you received together, list it	Jividends; money collection only once under Debtor	xted from lawsuits r 1.	s; royalties; and gamb	oling and lottery winnings. If y	nployment, and other public benefit ou are filing a joint case and you
☑ No						
🔲 Yes. Fill i	in the details.					
		Debtor 1			Debtor 2	
		Sources of incom	ie Gross	income from each	Sources of income	First Control
		Describe feelow	50Uffx	e	Describe below	Gross income from each source
	•		(before exclus	e déductions and lons)	r en la serie de la calenda de la como de la como de la como de la como de la como de la como de la como de la La como de la como de	(before deductions and exclusions)
From Januar	ry 1 of current year until the					Alfan and Armanagan Chair and the
date you file	d for bankruptcy:			<u></u>	 	<u> </u>
				<u> </u>		

otor 2		ında				Ledere	m ent	Page	e 42 of	f 58						
		Name	Mi	ddle Name		Last Na					Case	number (i	if knov	vn)		
Eor loct	t onlawdau.							•								
	t calendar y v 1 to Daca	ear: mber 31, <u>20</u>	.17 Y				- -			- —	· · ·					
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January	y 1 to Decer	mber 31, <u>20</u>											_			
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t 3: L	List Certa	ain Paym	ents Y	ou Made	Befor	e You Fil	ed for B	ankrupto	у							
iro oith	or Dobtos 1	'o eu Debiu	0/1-1			_								-		 -
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⊒No.	Neither I	Debtor 1 no I primarily fo	Debto	2 has prin	arily c	onsumer o	lebts. Con	sumer debt	s are defin	ed in 11	U.S.C. §	101(8) as	i'incu	rred by	an	
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btor 1 btor 2	Cesar Amanda		DanaHeeent Lederer	Page 43 of 58	
	First Name	Middle Name			Case number (if known)
		et.	Dates of Total ari payment	Maint paid Amount you s	Reason for this payment
Insider's Na	ame				_
Number	Street				
	W			:	
City	State	ZIP Code			
☑ No	y		d you make any payments or t ly an insider.	ransfer any property on acc	count of a debt that benefited an insider?
Yes. List	t all payments that ben	refited an insider.	Zeehioza ahiza azarta		
			Dates of the payment payment	Okrat paid Amount you st	ill care. Treason for this payment. The are creators name.
Insider's Nar	me	<u> </u>			-
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C.1.,		ZIF Coue			
Within 1 yea st all such ma sputes.	ar before you filed for	er handrumtev ure	re you a party in any lawsuit, or small claims actions, divorces, or	ourt action, or administrative collection suits, paternity action	e proceeding? ons, support or custody modifications, and contra
Within 1 yea st all such ma sputes.	ar before you filed for atters, including perso	er handrumtev ure		ourt action, or administrative collection suits, paternity action	e proceeding? ons, support or custody modifications, and contra
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Within 1 yea st all such ma sputes. ☑No □Yes. Fill in	ar before you filed for atters, including perso	or bankruptcy, we onal injury cases,	re you a party in any lawsuit, co small claims actions, divorces, c	Ourt action, or administrative collection suits, paternity action suits, paternity action suits, paternity actions are actions.	Status of the case
. Within 1 yea st all such ma sputes.	ar before you filed for atters, including perso n the details.	or bankruptcy, we onal injury cases,	re you a party in any lawsuit, co small claims actions, divorces, c	Count or agency	ons, support or custody modifications, and contra

ebtor 1 ebtor 2	Cesar Amanda		ര ംപ്പെട്ടുent	Page 44 of 58		
CDIOI Z	First Name	Middle Name	Lederer Last Name		Case number (if known)	
٠			·			
10. Within 1	l year before you fi	led for bankruptcy was a	any of your property repo	ssessed, foreclosed, ga	mished, attached, seized, or levied	i?
Check all th	at apply and IIII in th	e details below.			, , , , , , , , , , , , , , , , , , , ,	-
	o to line 11.					
☐Yes. Fi	ill in the information	below.				
			Describe the prop	envis management	Date L'	liue of the property
				overflood one still statistical	(a. primar) (vejest produce sprima de economía (e. 115), co	
Creditor's I	Name				<u> </u>	
Number	Street	**************************************	Explain what hap	sensed .		
			☐Property was rep			
			☐Property was for			
			Property was ga			
City	S	tate ZIP Code		ached, seized, or levied.		
				,		•
☐Yes. Fi	ill in the details.					
Yes. Fi	ill in the details.					
		· · · · · · · · · · · · · · · · · · ·	escribe the action the cr	citor teak	Date estiminas Amo	unt
Creditor's N	Name			ation at an experience of	ALLONDON CONTRACTOR	阿斯斯斯的 斯斯斯斯
	· · ·	-				
Number	Street				· ·	
		Acceptance				·
City	Sta	te ZIP Code	- 1 - 1 - 2		MANAGE SECTION AND AND AND AND AND AND AND AND AND AN	
"Haderal kanana manananya.	ikir obbi isanian mananan an isanian 196 kilo obrob salah manasan sanon sasa	Las	st 4 digits of account numb	er: XXXX		
2. Within 1	year before you file	ed for bankruptcy, was a	ny of your property in the	possession of an assi	gnee for the benefit of creditors, a	court-appointed
Journal of Co	ustodian, or anoth	er official?			,	
☑ No						
Yes						
art 5. Lie	et Cortain Giffo	and Contributions				
	or Certain Girts	and Contributions	·			
3. Within 2	years before you fi	led for bankruptcy did v	ou give any gifts with a to	ntal Value of more than t	tem per person?	
₩No	_	. ,		our value of more digit.	xoo pa pason:	
	in the details for ea	مام حاله				
Tes. Fill	in the details for ea	acn gm.				
cial Form 10)7	Stateme	ent of Firnancial Affairs fo	r Individuals Filing for P	łanka intev	
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page 5

Case 18-26781 Doc 1 Filed 09/24/18 Entered 09/24/18 14:30:46 Desc Main

Debtor 1 Debtor 2	Cesar Amanda	3-26781		Filed 09/24/18 Dangshagent Lederer	Entered 09/24 Page 45 of 58		Desc Main
	First Name	Middle N		Last Name		(), (nowing
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Person to \	Whom You Gave th	e Gift	direct and a second sec				
North			**************************************			The second secon	
Number	Street		VEPENDAN VARIABILIA ARABA ARABA			Andrew Williams	
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1 03011310	addoriship to you .		<u> </u>				
14. Within 2	years before you	filed for bankru	ptcy, did y	ou give any gifts or contri	ibutions with a total valu	e of more than \$600 to	o any charity?
☑ No ☐ Yes. Fill	l in the details for o	each gift or cont	ibution.				
Gills eine			Marie Control Control Control	hat you contributed		contributed to	Valce
Charity's Na	me	Warman and the state of the sta					· .
	······································	William And Company				-	
Number	Street	The second secon					
City	State	ZIP Code	eren er i Malliad de entre personalistat			With the state of	
				÷			
	t Certain Loss						
15. Within 1 y ☑ No	ear before you file	ed for bankrupt	cy or since	you filed for bankruptcy,	did you lose anything b	ecause of theft, fire, o	ther disaster, or gambling?
	in the details.						
104 the to	ie propesy voli S-occure (* 17 14 mai de 18 mai de 14 mai de 18 mai de	inde	de the am	ristrance coverage for the cultilities insurance has par is on line 33 or Schedue A	Est pending - Common	Date of your loss.	Value of property lost
and in the Management of the San San San San San San San San San San							
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icial Form 107	7		Statemen	t of Financial Affairs for I	ndividuals Filing for Bar	nkruptcy	pag

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Part 7: List Co	irst Name	Middle	e Name	Last Name		Case number (if ki	nown)
	ertain Pay	yments or 1	Fransfers				
			· · · · · · · · · · · · · · · · · · ·				
16. Within 1 year	before you	filed for bankr	ruptcy did yo	u or anyone else acting o	n vour behalf pay or tr	ansfer any property to a	nyone you consulted about
							nyone you consumed about
⊠ No	cys, banku	ocy peddon pro	eparers, or cre	edit counseling agencies fo	r services required in y	our bankruptcy.	
Yes. Fill in th	e details.						
			Description	and value of any proper	ty transferred	Date payment or	Amount of payment
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Number Stree	et .						
							
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City	State	ZIP Code	1				
E				•			
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Person Who Mad	e the Payme	ent. if Not You	and the second				
	/ - j,	, 1100 100			***************************************		
o not include any			·			• • • • • • • • • • • • • • • • • • •	
Yes. Fill in the	e details.						
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Debtor 1 Debtor 2	Case 18-20	6781 Do	Dan	09/24/18 2419 3ent	Entered 09/24/ Page 47 of 58	18 14:30:46 [Desc Main
CORUI Z	Arnanda First Name	Middle Nam	Lede	Name	<u></u>	Case number (if know	vn)
		De	scription and valuation		Describe any acquire and acquire and depth policy in the	caty or payments receiv cchange	Pate transfer was chade
Person Who	o Received Transfer				and applications and applications and applications and applications and applications and applications and applications are applications and applications are applications and applications are applications and applications are applications and applications are applications and applications are applications are applications are applications and applications are ap		
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City	State ZIF	Code	The control of the co				
Person's re	lationship to you	ent excess er er er er er er er er er er er er er					
19. Within 10 often called <i>a</i> :	years before you file sset-protection device	d for bankrupt s.)	cy, did you transf	er any property	to a self-settled trust or si	milar device of which yo	ou are a beneficiary?(These are
☑ No							
Yes. Fill	in the details.			***			
		Des	cription and valu	e of the proper	ty transferred		Date transfer was made
Name of tru	st						
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					sit Boxes, and Storag		
nclude checkir	ng, savings, money ma	arket, or other fi	inancial accounts:	al accounts or i	instruments held in your n leposit; shares in banks, cre	ame, or for your benefit	, closed, sold, moved, or
ooperatives, a ∑í No	associations, and othe	r financial institu	utions.		, , , , , , , , , , , , , , , , , , , ,	ar amons, brokerage no	uses, pension lungs,
Yes. Fill in	n the details.						
	·	Lasi	ा digits of accou	## rumber	Type of account or instrument	Date account was closed, sold, moved transferred	Last billarice of Defore closing or transfer
Name of Finar	ncial Institution	XXX	кx- <u> </u>		☐ Checking		
					По	•	
	treet	· · · · · · · · · · · · · · · · · · ·			☐ Savings ☐ Money market ☐ Brokerage		
	treet State ZIP C	ode.			☐ Money market		

Amanu First Na 21. Do you now have, ovaluables? 1 No 1 Yes. Fill in the det	ame Mid O r did you have wit ails.	thin 1 year before yo		y any safe deposit box or oth		ties, cash, or other Do you still have
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☑ No ☑ Yes. Fill in the det	ails.	Who else had				Do you still have
Yes. Fill in the det			accessio it?	Describe the oxide	915.	Do you still have
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		City —	State ZIP Code	•		AA AAA AAA AAA AAA AAA AAA AAA AAA AAA
City	State ZIP Code					
_						
. Have you stored pro ∡	perty in a storage	unit or place other t	han your home withi	n 1 year before you filed for b	pankruptcy?	
ĭ∕No				•		
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btor 2	Amanda	Lederer	Case number (if known)
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Sandbox Name	LLC		Do not include Social Security tember of ITIN
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Debtor 1 Debtor 2	Cesar Amanda		Document Lederer	Page 52 of 58
	First Name	Middle Name	Last Name	Case number (if known)
Part 12: S	ign Below			
COLLEGE LTHE	nei orania miar iliakiliki	a laise statement, con	cealing broberty or ob	ents, and I declare under penalty of perjury that the answers are true and laining money or property by fraud in connection with a bankruptcy case B U.S.C. §§ 152, 1341, 1519, and 3571.
Signate	ure of Cesar Canizare	s, Debtor 1	X Signatur	e of Amanda Lederer, Debtor 2
Date <u>C</u>	09/24/2018		Date <u>09</u>	/24/2018
		•		
Did you attac	ch additional pages to	your Statement of Fin	nancial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
Yes				
Did you pay o	or agree to pay some	one who is not an attor	ney to help you fill out I	Dankruptcy forms?
 No	:			
Yes. Nan	me of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 18-26781 Doc 1 Filed 09/24/18 Entered 09/24/18 14:30:46 Casar Amanda Debtor 1 Document Page 53 of 58 Debtor 2 Lederer Case number (it known). First Name Middle Name Last Name Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of parity that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or impresonment for up to 20 years, or both, 18 U.S.C. §§ 152, 1241, 1819, and 3571. Signature of Gesar Canizares, Debtor 1 Signature of Arnanda Lederer, Debtor 2 Date 09/18/2018 Date 09/18/2018 Old you attach additional pages to your Statement of Financial Attains for Individuals Filing for Bankruptoy (Official Form 107)? MNo Q Yes Did you pay or agree to pay someons who is not an attorney to help you fill out bankruptcy forms? MNo Attach the Bankruptcy Polition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐Yes. Name of person

Fill in this information	to identify your case.				24/18 14:30:46	Desc Main
Debtor 1	Cesar		Document Canizares	Page 34 or	5 6	
	First Name	Middle Name	Last Name	-		
Debtor 2	Amanda		Lederer			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankri	uptcy Court for the:		Northern District of	Illinois		
Case number (if known)						Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form. Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that secures a Did you claim the property as Creditor's Surrender the property. name: Associated Bank Retain the property and redeem it. ☑ Yes Description of 2929 N Moody Ave Chicago, IL Retain the property and enter into a property 60634-5027 Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. ☑ No name: **DMK Express Inc.** Retain the property and redeem it. ☐ Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]:

Debtor	1
Debtor	2

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First Name	Middle Name	Doctinient —	Page 55 o f 58	Case number (if i	known)

expired Personal Property Leases	
al property lease that you listed in <i>Schedule G: Executory Contracts and</i> te leases. <i>Unexpired leases</i> are leases that are still in effect; the lease peried does not assume it. 11 U.S.C. § 365(p)(2).	Unexpired Leases (Official Form 106G), fill in the informatio iod has not yet ended. You may assume an unexpired person
to leave the leave to the leave	
VW Credit	Will the lease be assumed? ☑ No
	☐ Yes
2018 Audi Q5	
GM Financial	3 No
	☐ Yes
2018 Chevy Equinox	⊒ les
DMK Express Inc	
	No
2007 Volvo Semi Trailer	√ Yes
	☐ No
	☐ Yes
	□ No
The state of the s	☐ Yes
	□ No
	☐ Yes
	No No
	☐ Yes
	□ res
declare that I have indicated my intentional	
lease.	e that secures a debt and any personal property that
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Signature of Debtor 2	\$ 1.00 m
— Date <u>09/24/2018</u>	
	al property lease that you listed in Schedule G: Executory Contracts and te leases. Unexpired leases are leases that are still in effect; the lease per se does not assume it. 11 U.S.C. § 365(p)(2). CO persons property leases WW Credit 2018 Audi Q5 GM Financial 2018 Chevy Equinox DMK Express Inc 2007 Volvo Semi Trailer declare that I have indicated my intention about any property of my estat lease. X Signature of Debtor 2

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Part 2	List Your Un	expired Personal Proper	ty Losses		₩ ₁ ₩ ₂		
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200000000000000000000000000000000000000	and the second second second second second	red personal property meses		grange awar in his	a da	Vill the lease b	
	ors name:	VW Credit			e se e Harti Zantena.	≨ ŽÍ No	- CONTRACT
	aption of leased sity	2018 Audi Q5	AMARIAN SANSA PARAMAKAN PARAMAKAN PARAMAKAN PARAMAKAN PARAMAKAN PARAMAKAN PARAMAKAN PARAMAKAN PARAMAKAN PARAMA	AND THE COMMENT OF THE PARTY OF		Dre	
	As Gueri	SM Finandal		12		Ø No	
	Siption of leased	2018 Chevy Equinox				LI Yes	
	X's name.	DMK Express inc		managan an ang managan an an ang managan an		LI No	
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Date (9/18/2018 VMW, DDV, YYYY	in the second se	Date 09/18	. 150			

United States Bankruptcy Court Northern District of Illinois

ln r			Case No.	-
	Lederer, Amanda			"
	Debtor(s)		Chapter	7
	DISCLOSURI	E OF COMPENSATION O	F ATTORNEY FOR DEBT	OR(S)
1.	Pursuant to 11 U .S.C. § 329 named debtor(s) and that c bankruptcy, or agreed to be debtor(s) in contemplation c	paid to me, for services re	within one year before the	e filing of the petition in
	FLAT FEE			
	For legal services, I hav	re agreed to accept	234194434122241414141414141414141414141414141	\$2,335.00
	Prior to the filing of this	statement I have receive	d	
	Balance Due			\$2,335.00
	RETAINER			\$0.00
	For legal services, I hav	e agreed to accept and re	eceived a retainer of	
		oill against the retainer at		
	Or attach firm hourly rat approved fees and expe	te schedule.] Debtor(s) ha	ve agreed to pay all Cour unt of the retainer.	t
2.	\$0.00 of the filing fee ha	s been paid.		
3.	The source of the compensati	on to be paid to me was:		
	☑ Debtor	Other (specify)		
4.	The source of compensation t	o be paid to me is:		
	☑ Debtor	Other (specify)		
5. l	I have not agreed to share unless they are members and a	the above-disclosed compassociates of my law firm.	pensation with any other	person
	I have agreed to share the persons who are not members ogether with a list of the name	it wellym to 24tkl2022K 10	rm A convertible seems	
6. I	n return for the above-disclose of the bankruptcy case, includi	ed fee, I have agreed to re ng:	ender legal service for all	aspects

 Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

ln re	Case 18-26781	Doc 1	Filed 09/24/18	Entered 09/24/18	14:30:46	Desc Main	
	Lederer, Amanda	······································	Document —	Page 58 of 58	Case	No	

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) (Continuation Sheet)

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- 7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

	CERTIFICATION
I certify that the farrangement for pay proceeding. 09/24/2018	oregoing is a complete statement of any agreement or ment to me for representation of the debtor(s) in this bankruptcy
Date	Signature of Attorney
	orginature of Attorney